

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. 231895US0
		First Inventor or Application Identifier Veronique CHEVALIER
		Title COMPOSITION CONTAINING FIBERS AND POLYURETHANE, METHODS

USPTO  
10/7/03  
110503  
110503

<b>APPLICATION ELEMENTS</b> <small>See MPEP chapter 600 concerning utility patent application contents</small>		<b>ADDRESS TO:</b> Commissioner for Patents Mail Stop Patent Application Alexandria, Virginia 22313
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) <small>(Submit an original and a duplicate for fee processing)</small>		<b>ACCOMPANYING APPLICATION PARTS</b>
2. <input checked="" type="checkbox"/> Specification	Total Sheets <b>45</b>	7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))
3. <input type="checkbox"/> Drawing(s) (35 U.S.C. 113)	Total Sheets <b>      </b>	8. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76
4. <input type="checkbox"/> Oath or Declaration	Total Pages <b>      </b>	9. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <i>(when there is an assignee)</i> <input type="checkbox"/> Power of Attorney
a. <input type="checkbox"/> Newly executed (original or copy)		10. <input type="checkbox"/> English Translation Document <i>(if applicable)</i>
b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. §1.63(d)) <i>(for continuation/divisional with box 17 completed)</i>		11. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations
i. <input type="checkbox"/> DELETION OF INVENTOR(S)		12. <input type="checkbox"/> Preliminary Amendment
Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §1.63(d)(2) and 1.33(b).		13. <input checked="" type="checkbox"/> White Advance Serial No. Postcard
5. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)		14. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i>
6. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i>		15. <input type="checkbox"/> Applicant claims small entity status. <i>See 37 CFR 1.27</i>
a. <input type="checkbox"/> Computer Readable Form (CRF)		16. <input checked="" type="checkbox"/> Other: Request for Priority French Search Report
b. Specification or Sequence Listing on :		
i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or		
ii. <input type="checkbox"/> Paper		
c. <input type="checkbox"/> Statements verifying identity of above copies		

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below:

Continuation     Divisional     Continuation-in-part (CIP)    of prior application no.:

Prior application information: Examiner:

Group Art Unit:

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

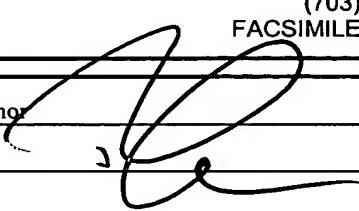
#### 18. CORRESPONDENCE ADDRESS

Customer Number

**22850**

(703) 413-3000

FACSIMILE: (703) 413-2220

Name: Richard L. Treanor	Registration No.: 36,379
Signature: 	Date: 11/5/03
Name: 	Registration No.: 

13281  
110503  
U.S. PTO

Docket No. 231895US0

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

INVENTOR(S) Veronique CHEVALIER, et al.

SERIAL NO: New Application

FILING DATE: Herewith

FOR: COMPOSITION CONTAINING FIBERS AND POLYURETHANE, METHODS

**FEE TRANSMITTAL**

COMMISSIONER FOR PATENTS  
ALEXANDRIA, VIRGINIA 22313

FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS
TOTAL CLAIMS	24 - 20 =	4	x \$18 =	\$72.00
INDEPENDENT CLAIMS	1 - 3 =	0	x \$86 =	\$0.00
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS (If applicable)			+ \$290 =	\$0.00
<input checked="" type="checkbox"/> LATE FILING OF DECLARATION			+ \$130 =	\$130.00
			BASIC FEE	\$770.00
			TOTAL OF ABOVE CALCULATIONS	\$972.00
<input type="checkbox"/> REDUCTION BY 50% FOR FILING BY SMALL ENTITY				\$0.00
<input type="checkbox"/> FILING IN NON-ENGLISH LANGUAGE			+ \$130 =	\$0.00
<input type="checkbox"/> RECORDATION OF ASSIGNMENT			+ \$40 =	\$0.00
			TOTAL	\$972.00

Please charge Deposit Account No. 15-0030 in the amount of **\$0.00** A duplicate copy of this sheet is enclosed.

A check in the amount of **\$972.00** to cover the filing fee is enclosed.

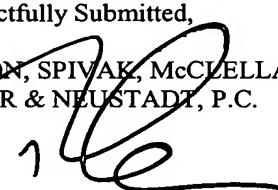
Credit card payment form is attached to cover the filing fee in the amount of **\$0.00**

The Director is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check or credit card payment is enclosed herewith, or credit any overpayment to Deposit Account No. 15-0030. A duplicate copy of this sheet is enclosed.

Respectfully Submitted,

OBLON, SPIVAK, McCLELLAND,  
MAIER & NEUSTADT, P.C.

Date: 11/15/03

  
Richard L. Treanor  
Registration No. 36,379

Customer Number

22850

Tel. (703) 413-3000  
Fax. (703) 413-2220  
(OSMMN 05/03)